

JS 44C/SDNY
REV. 07/08/16

CIVIL COVER SHEET

The JS-44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for use of the Clerk of Court for the purpose of initiating the civil docket sheet.

PLAINTIFFS
Michele BakerDEFENDANTS
Southern Wellcare Medical, P.C., Blue Medical Services, P.C., Pamela Ross, Individually, and Dmitiriy Miloslavskiy, IndividuallyATTORNEYS (FIRM NAME, ADDRESS, AND TELEPHONE NUMBER)
Phillips & Associates PLLC
45 Broadway, Suite 620
New York, NY, 10006 212-248-7431

ATTORNEYS (IF KNOWN)

CAUSE OF ACTION (CITE THE U.S. CIVIL STATUTE UNDER WHICH YOU ARE FILING AND WRITE A BRIEF STATEMENT OF CAUSE)
(DO NOT CITE JURISDICTIONAL STATUTES UNLESS DIVERSITY)

42 U.S.C. § 2000e to 2000e-17, et. seq.: Employment Discrimination - Pregnancy and Gender

Judge Previously Assigned

Has this action, case, or proceeding, or one essentially the same been previously filed in SDNY at any time? No Yes If yes, was this case Vol. Invol. Dismissed. No Yes If yes, give date _____ & Case No. _____

IS THIS AN INTERNATIONAL ARBITRATION CASE?

No Yes (PLACE AN IN ONE BOX ONLY)

NATURE OF SUIT

		TORTS	ACTIONS UNDER STATUTES			
CONTRACT	PERSONAL INJURY	PERSONAL INJURY	FORFEITURE/PENALTY	BANKRUPTCY	OTHER STATUTES	
<input type="checkbox"/> 110 INSURANCE	<input type="checkbox"/> 310 AIRPLANE	<input type="checkbox"/> 387 HEALTHCARE/	<input type="checkbox"/> 625 DRUG RELATED	<input type="checkbox"/> 1422 APPEAL	<input type="checkbox"/> 375 FALSE CLAIMS	
<input type="checkbox"/> 120 MARINE	<input type="checkbox"/> 315 AIRPLANE PRODUCT	<input type="checkbox"/> PHARMACEUTICAL PERSONAL	<input type="checkbox"/> SEIZURE OF PROPERTY	<input type="checkbox"/> 28 USC 158	<input type="checkbox"/> 376 QUI TAM	
<input type="checkbox"/> 130 MILLER ACT	<input type="checkbox"/> LIABILITY	<input type="checkbox"/> INJURY/PRODUCT LIABILITY	<input type="checkbox"/> 365 PERSONAL INJURY	<input type="checkbox"/> 1423 WITHDRAWAL	<input type="checkbox"/> 400 STATE	
<input type="checkbox"/> 140 NEGOTIABLE INSTRUMENT	<input type="checkbox"/> 320 ASSAULT, LIBEL & SLANDER	<input type="checkbox"/> PRODUCT LIABILITY	<input type="checkbox"/> 21 USC 881	<input type="checkbox"/> 28 USC 157	<input type="checkbox"/> REAPPCRTIONMENT	
<input type="checkbox"/> 150 RECOVERY OF OVERPAYMENT & ENFORCEMENT OF JUDGMENT	<input type="checkbox"/> 330 FEDERAL EMPLOYERS' LIABILITY	<input type="checkbox"/> 368 ASBESTOS PERSONAL INJURY	<input type="checkbox"/> 1690 OTHER	<input type="checkbox"/> PROPERTY RIGHTS	<input type="checkbox"/> 1410 ANTITRUST	
<input type="checkbox"/> 151 MEDICARE ACT	<input type="checkbox"/> 340 MARINE	<input type="checkbox"/> PERSONAL PROPERTY		<input type="checkbox"/> 1820 COPYRIGHTS	<input type="checkbox"/> 430 BANKS & BANKING	
<input type="checkbox"/> 152 RECOVERY OF DEFULTED STUDENT LOANS (EXCL VETERANS)	<input type="checkbox"/> 345 MARINE PRODUCT LIABILITY	<input type="checkbox"/> 370 OTHER FRAUD		<input type="checkbox"/> 830 PATENT	<input type="checkbox"/> 450 COMMERCE	
	<input type="checkbox"/> 350 MOTOR VEHICLE	<input type="checkbox"/> 371 TRUTH IN LENDING		<input type="checkbox"/> 840 TRADEMARK	<input type="checkbox"/> 460 DEPORTATION	
<input type="checkbox"/> 153 RECOVERY OF OVERPAYMENT OF VETERAN'S BENEFITS	<input type="checkbox"/> 360 OTHER PERSONAL INJURY	<input type="checkbox"/> 380 OTHER PERSONAL PROPERTY DAMAGE	<input type="checkbox"/> LABOR	<input type="checkbox"/> 861 HIA (1385f)	<input type="checkbox"/> 470 RACKETEER INFLUENCED & CORRUPT ORGANIZATION ACT (RICO)	
<input type="checkbox"/> 160 STOCKHOLDERS SUITS	<input type="checkbox"/> 362 PERSONAL INJURY - MED MALPRACTICE	<input type="checkbox"/> 385 PROPERTY DAMAGE	<input type="checkbox"/> 710 FAIR LABOR STANDARDS ACT	<input type="checkbox"/> 862 BLACK LUNG (923)	<input type="checkbox"/> 480 CONSUMER CREDIT	
<input type="checkbox"/> 170 OTHER CONTRACT		<input type="checkbox"/> PRODUCT LIABILITY	<input type="checkbox"/> 720 LABOR/MGMT RELATIONS	<input type="checkbox"/> 863 DWIC/DIVWV (405(g))	<input type="checkbox"/> 490 CABLE/SATELLITE TV	
<input type="checkbox"/> 195 PRODUCT LIABILITY	ACTIONS UNDER STATUTES	PRISONER PETITIONS	<input type="checkbox"/> 740 RAILWAY LABOR ACT	<input type="checkbox"/> 864 SSID TITLE XVI		
<input type="checkbox"/> 196 FRANCHISE	CIVIL RIGHTS	<input type="checkbox"/> 463 ALIEN DETAINEE	<input type="checkbox"/> 751 FAMILY MEDICAL LEAVE ACT (FMLA)	<input type="checkbox"/> 865 RSI (405(g))	<input type="checkbox"/> 850 SECURITIES/ COMMODITIES/ EXCHANGE	
		<input type="checkbox"/> 510 MOTIONS TO VACATE SENTENCE	<input type="checkbox"/> 790 OTHER LABOR LITIGATION	<input type="checkbox"/> 870 TAXES (U.S. Plaintiff or Defendant)	<input type="checkbox"/> 880 OTHER STATUTORY ACTIONS	
		<input type="checkbox"/> 28 USC 2255	<input type="checkbox"/> 871 IRS-THIRD PARTY	<input type="checkbox"/> 871 IRS-THIRD PARTY	<input type="checkbox"/> 891 AGRICULTURAL ACTS	
		<input type="checkbox"/> 530 HABEAS CORPUS	<input type="checkbox"/> 791 EMPL RET INC SECURITY ACT (ERISA)	<input type="checkbox"/> 26 USC 7609	<input type="checkbox"/> 893 ENVIRONMENTAL MATTERS	
		<input type="checkbox"/> 535 DEATH PENALTY			<input type="checkbox"/> 895 FREEDOM OF INFORMATION ACT	
		<input type="checkbox"/> 540 MANDAMUS & OTHER			<input type="checkbox"/> 896 ARBITRATION	
REAL PROPERTY	1440 OTHER CIVIL RIGHTS (Non-Prisoner)		IMMIGRATION		<input type="checkbox"/> 899 ADMINISTRATIVE PROCEDURE ACT/REVIEW OR APPEAL OF AGENCY DECISION	
<input type="checkbox"/> 210 LAND CONDEMNATION	<input type="checkbox"/> 441 VOTING	PRISONER CIVIL RIGHTS	<input type="checkbox"/> 462 NATURALIZATION APPLICATION		<input type="checkbox"/> 950 CONSTITUTIONALITY OF STATE STATUTES	
<input type="checkbox"/> 220 FORECLOSURE	<input type="checkbox"/> 442 EMPLOYMENT		<input type="checkbox"/> 465 OTHER IMMIGRATION ACTIONS			
<input type="checkbox"/> 230 RENT LEASE & EJECTMENT	<input type="checkbox"/> 443 HOUSING/ ACCOMMODATIONS	<input type="checkbox"/> 550 CIVIL RIGHTS				
<input type="checkbox"/> 240 TORTS TO LAND	<input type="checkbox"/> 445 AMERICANS WITH DISABILITIES - EMPLOYMENT	<input type="checkbox"/> 555 PRISON CONDITION				
<input type="checkbox"/> 245 TORT PRODUCT LIABILITY	<input type="checkbox"/> 446 AMERICANS WITH DISABILITIES - OTHER	<input type="checkbox"/> 560 CIVIL DETAINEE CONDITIONS OF CONFINEMENT				
<input type="checkbox"/> 290 ALL OTHER REAL PROPERTY	<input type="checkbox"/> 448 EDUCATION					

Check if demanded in complaint:

 CHECK IF THIS IS A CLASS ACTION UNDER F.R.C.P. 23DO YOU CLAIM THIS CASE IS RELATED TO A CIVIL CASE NOW PENDING IN S.D.N.Y. AS DEFINED BY LOCAL RULE FOR DIVISION OF BUSINESS 13?
IF SO, STATE:

DEMAND \$ _____ OTHER _____ JUDGE _____ DOCKET NUMBER _____

Check YES only if demanded in complaint
JURY DEMAND: YES NO

NOTE: You must also submit at the time of filing the Statement of Relatedness form (Form IH-32).

(PLACE AN X IN ONE BOX ONLY)

<input checked="" type="checkbox"/> 1 Original Proceeding	<input type="checkbox"/> 2 Removed from State Court	<input type="checkbox"/> 3 Remanded from Appellate Court	<input type="checkbox"/> 4 Reinstated or Reopened	<input type="checkbox"/> 5 Transferred from (Specify District)	<input type="checkbox"/> 6 Multidistrict Litigation (Transferred)	<input type="checkbox"/> 7 Appeal to District Judge from Magistrate Judge
			<input type="checkbox"/> 8 Multidistrict Litigation (Direct File)			
<input type="checkbox"/> a. all parties represented						
<input type="checkbox"/> b. At least one party is pro se.						

(PLACE AN X IN ONE BOX ONLY)

<input type="checkbox"/> 1 U.S. PLAINTIFF	<input type="checkbox"/> 2 U.S. DEFENDANT	<input checked="" type="checkbox"/> 3 FEDERAL QUESTION	<input type="checkbox"/> 4 DIVERSITY (U.S. NOT A PARTY)
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BASIS OF JURISDICTION**IF DIVERSITY, INDICATE CITIZENSHIP BELOW.****CITIZENSHIP OF PRINCIPAL PARTIES (FOR DIVERSITY CASES ONLY)**

(Place an [X] in one box for Plaintiff and one box for Defendant)

CITIZEN OF THIS STATE	PTF <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 1	DEF <input type="checkbox"/> 1 <input type="checkbox"/> 1	CITIZEN OR SUBJECT OF A FOREIGN COUNTRY	PTF DEF <input type="checkbox"/> 1 <input type="checkbox"/> 3 <input checked="" type="checkbox"/> 3	INCORPORATED and PRINCIPAL PLACE OF BUSINESS IN ANOTHER STATE	PTF <input type="checkbox"/> 5 <input type="checkbox"/> 5	DEF <input type="checkbox"/> 5 <input type="checkbox"/> 5
CITIZEN OF ANOTHER STATE	<input type="checkbox"/> 2 <input type="checkbox"/> 2		INCORPORATED or PRINCIPAL PLACE OF BUSINESS IN THIS STATE	<input type="checkbox"/> 4 <input type="checkbox"/> 4	FOREIGN NATION	<input type="checkbox"/> 6 <input type="checkbox"/> 6	

PLAINTIFF(S) ADDRESS(ES) AND COUNTY(IES)

Phillips & Associates PLLC
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 New York, NY, 10006
 212-248-7431

DEFENDANT(S) ADDRESS(ES) AND COUNTY(IES)

Southern Wellcare Medical, P.C.	Blue Medical Services, P.C.
2336 Grand Concourse	437 West 125th Street
Bronx, New York 10458	New York, New York 10027

DEFENDANT(S) ADDRESS UNKNOWN

REPRESENTATION IS HEREBY MADE THAT, AT THIS TIME, I HAVE BEEN UNABLE, WITH REASONABLE DILIGENCE, TO ASCERTAIN THE RESIDENCE ADDRESSES OF THE FOLLOWING DEFENDANTS:

COURTHOUSE ASSIGNMENT

I hereby certify that this case should be assigned to the courthouse indicated below pursuant to Local Rule for Division of Business 18, 20 or 21.
 DO NOT check either box if this is a PRISONER PETITION/PRISONER CIVIL RIGHTS COMPLAINT.

Check one: THIS ACTION SHOULD BE ASSIGNED TO: WHITE PLAINS MANHATTAN

DATE 05/02/2017 SIGNATURE OF ATTORNEY OF RECORD

RECEIPT #

ADMITTED TO PRACTICE IN THIS DISTRICT

[] NO
 YES (DATE ADMITTED Mo. April Yr. 2004)
 Attorney Bar Code # GC8140

Magistrate Judge is to be designated by the Clerk of the Court.

Magistrate Judge _____ is so Designated.

Ruby J. Krajick, Clerk of Court by _____ Deputy Clerk, DATED _____.

UNITED STATES DISTRICT COURT (NEW YORK SOUTHERN)